



**STATEMENT OF PROCEEDINGS FOR THE  
REGULAR MEETING OF THE  
LOS ANGELES COUNTY COMMISSION FOR  
CHILDREN AND FAMILIES  
KENNETH HAHN HALL OF ADMINISTRATION  
500 WEST TEMPLE STREET, ROOM 140  
LOS ANGELES, CALIFORNIA 90012  
<http://latchildrenscommission.org>**

**Monday, November 17, 2014**

**10:00 AM**

AUDIO LINK FOR THE ENTIRE MEETING (14-5382)

**Attachments:**    [AUDIO](#)

Call to Order. (14-5222)

**The meeting was called to order at 10:08 a.m.**

Present:            Commissioner Candace Cooper, Commissioner Patricia Curry,  
                         Commissioner Ann E. Franzen, Commissioner Dr. Sunny Kang,  
                         Commissioner Helen Kleinberg, Commissioner Liz Seipel,  
                         Commissioner Adelina Sorkin LCSW/ACSW, Commissioner  
                         Martha Trevino-Powell, Vice Chair Carol O. Biondi and Chair  
                         Susan F. Friedman

Excused:           Commissioner Genevra Berger, Commissioner Adrienne  
                         Konigar-Macklin, Commissioner Steven M. Olivas Esq. and Vice  
                         Chair Sydney Kamlager

**I. ADMINISTRATIVE MATTERS**

1. Introductions of November 17, 2014 meeting attendees. (14-5223)

**Self-introductions were made.**

2. Approval of the November 17, 2014 Meeting Agenda. (14-5224)

**On motion of Commissioner Sorkin, seconded by Commissioner Kleinberg (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), this item was approved.**

3. Approval of the minutes from the meeting of October 6, 2014. (14-4933)

**On motion of Commissioner Sorkin, seconded by Commissioner Kang**

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(Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), this item was approved.

Attachments:    [SUPPORTING DOCUMENT](#)

4.      Approval of the minutes from the meeting of October 20, 2014. (14-5244)

On motion of Commissioner Seipel, seconded by Commissioner Kleinberg (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), the October 20, 2014 Minutes were approved with the following correction to be noted on page 6 to read: ~~Commissioner Seipel has connections with various departments from her work, and after her retirement in 2008 she founded a child and family center to provide wrap-around services.~~ Commissioner Seipel has connections with various departments from her work with Child and Family Center, which she founded in 1976 with two other women. She retired in 2008 just as the wrap-around service program was beginning.

Attachments:    [SUPPORTING DOCUMENT](#)

5.      Approval of the minutes from the meeting of November 3, 2014. (14-5245)

On motion of Commissioner Kang, seconded by Commissioner Seipel (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), this item was approved.

Attachments:    [SUPPORTING DOCUMENT](#)

## II. REPORTS

6.      Chair's report for November 17, 2014 by Susan F. Friedman, Chair. (14-5225)

Chair Friedman reported on the following:

- The 15th Anniversary of National Adoption Day is scheduled for Saturday, November 22, 2014 at 9:00 a.m. at Edmund D. Edelman Children's Court. During this event, a special ceremony will take place in the morning to commemorate Judge Nash's retirement.
- The Opportunity Youth Collaborative meeting is scheduled for Wednesday, November 19, 2014. If interested, please contact Chair Friedman. The Opportunity Youth Collaborative

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was referred to the Commission by the Alliance for Children's' Rights who deal with transitional age youth on issues such as jobs, education, and housing.

- The Foster Youth Advisory Commission to Department of Children and Family Services (DCFS) meeting is scheduled for Thursday, November 20, 2014 at 6:00 p.m. The Commission was asked by DCFS to have a CCF representative for their training and advisory board. Vice Chair Biondi volunteered, and Commissioner Sorkin volunteered to be an alternate. Commissioner Kleinberg will also be attending.
- The next regular meeting for Commission for Children and Families has been rescheduled for Monday, December 8, 2014 due to the Oath of Office Ceremonies scheduled on Monday, December 1, 2014.

By Common Consent, there being no objection (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), the Commission accepted the Chair's report.

7. Department of Children and Family Services Director's Report for November 17, 2014 by Philip Browning, Director. (14-4925)

Director Browning reported on the following:

- The Department of Children and Family Services (DCFS) is requesting funds from the Productivity and Quality Commission to help automate the process of children in foster care receive psychotropic medication. In response to numerous media discussions regarding psychotropic medications and the amount being administered by foster children in particular, the State recently implemented a new process that required State approval prior to the administering or prescribing anti-psychotic medication. Currently, there is no system in DCFS to monitor how many children are taking these medications.

Since the implementation of the new process, there has been a concern among foster parents from Los Angeles County and around the State about prescribing psychotropic medications to their foster children. Some pharmacies were concerned that they would not fill the prescriptions despite some DCFS workers and foster parents already having them. Director Browning attended a meeting last Friday,

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hosted by the State, where discussion on psychotropic medication was addressed and most of the concerns on prescription were resolved. A 1-800 phone number was provided for situations where children cannot get their prescriptions. Additionally, pharmacies were instructed that they could fill a three-day-prescription, exclusive of State approval. Mr. Browning noted that the difficulties associated with this system are faced by DCFS on a regular basis.

With regard to the number of children with prescriptions, a large disconnect exists between DCFS and the State. In order to achieve a more unified understanding of these numbers, DCFS has asked the Department of Health Care Services the State agency that controls all of the Medi-Cal data for the State's payment records for comparison so DCFS can decipher who has been approved and who is receiving payment for that medication. There are two counties in the State that have used this comparison process and their findings show that there are medications being administered to children that the State is unaware of, and there are medications that the State knows.

DCFS is hoping to automate part of the process for approving medication; however, it is currently a cumbersome and manual paper project. DCFS obtained an approval from the State to complete some automation that would help speed up the process.

- Regarding relative caregiver, the goal is to provide the same financial payment to a relative providing for a child that does not meet the federal eligibility as one that does. Legislation proposed a plan; however, it is complicated. Details of the proposed plan have not been identified and the counties are trying to understand the methodology being used to determine the numbers. The State's data determined that there are 1,500 relatives in LA County who would be eligible; DCFS used the States methodology and the results were doubled. While the details are still being reconciled, the State agreed to pay for the amount for the first year, assuming that the individuals were eligible by July 1, 2014. The State will not pay for any new relatives after July 1, 2014. The concern is projecting and predicting what the cost will be in future years. The State has provided some additional flexibility as to when counties can opt in by extending the deadline to March 2015.

**There are complexities on how the payments would be made. The current plan is stating the use of the Electronic Benefit Transfer (EBT) card, and may create a problem as DCFS have individuals who are not eligible for CalWORKs.**

**In response to questions posed by the Commissioners, Director Browning responded:**

- **The State has an approval process that has been in existence for a number of years for prescribing medication to children less than five years of age. There are only 300 children across the State that are younger than five years of age and receiving anti-psychotic medications. The figure has decreased when the State moved the age limit up to 18 years of age.**

**The new State process encompasses and includes all children in the State and Medi-Cal recipients with private psychiatrist prescribing medication. The State implemented this process to prevent providers, foster homes and group homes, from using psychotropic medications as a means of control rather than therapy. A list of distinctions have to be identified on a form and presented to the State, including the child's diagnosis. The goal is to try to eliminate, minimize, and reduce the number of prescriptions used in lieu of behavioral treatment. Further, the State is not looking into the process of checking up and assessing if the medication is working weeks after the child starts their medication regimen. It is up to the foster parent, the group home, the social worker, and in some cases, the parent to ensure that the medication is working or not working. The State is aware and responding to the concern that children are receiving various medications. The State is monitoring how many medications are being approved and whether a medication meets the definition for that actual diagnosis.**

**Between all of the foster homes, group homes, and biological homes, there is no way to verify that a child is following with their medication regimen. Efforts are focused on approving a prescription at the local level for a child that has a treatment diagnosis. The concern is meant to address two issues: do we have children that are getting too many medications? And how to automate and streamline the**

process for medication approval? Legislators approved for the State to create a Request for Proposal (RFP) and the project is expected to reach full effect in the year 2020.

- Legislators conducted an analysis alongside DCFS Director Phillip Browning and it was agreed that if the number of people identified as eligible as relative caregivers by July 1, 2014 double the initial \$30 million budget cap, the State would still fund the project for the first year. Commencing the project is not a money issue, but the concern is the cost for ongoing or subsequent years.
- With respect to the concept of children aging out, as new children come in, two issues arise: (1) children placed with relatives are already receiving a CalWORKs payment, thus the difference in funding would be an additional \$500 rather than the full \$820; and (2) ineligible children in foster care are federally funded. There are many intricacies involved with the budget and discount rate. Legislators did not account any funding for items such as transportation, a premium that is available for the Federal 4E Waiver population.
- An RFP for the relative caregiver program is expected in the Spring 2015, and its goal is a “buy and build” approach, where an existing system from another state would be customized to meet the needs of California.

By Common Consent, there being no objection (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), the Commission accepted Director Browning's report.

### **III. PRESENTATIONS**

8. Reflections on Child Welfare from the Juvenile Court Perspective by the Honorable Michael Nash. (14-5243)
  - With respect to his upcoming retirement, Judge Nash's experience achieves a total of 30 years, 25 of which were spent in juvenile court. Beginning in 1996, Judge Nash has had a unique opportunity in leadership as the Presiding Judge of the juvenile court system.
  - In 1990, when Judge Nash started his career with the juvenile court, the court's jurisdiction hosted between 55,000-60,000 children.

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**Ninety-eight percent (98%) of these children were represented by County Counsel despite also being tasked to represent the Social Workers at the time. Tough legal battles were fought in the 1990s to establish the idea that children should have independent legal representation, and such is the case now in both Los Angeles and State-wide.**

- Partly due to federal legislation, the mid to late 1990s hosted a dramatic change in California law. The Adoption and the Safe Families Act increased the number of categories for cases by which re-unification was not offered to parents. Timeframes for reunification were shortened and federal law required termination of parental rights in 15 months. By 1997, the court found that they had terminated parental rights more often, which caused a backlog of 6,000 children who were freed for adoption, and waiting for their adoptions to be finalized.**
- Due to the court's collaborative efforts with various agencies, 35,000 children have been adopted in Los Angeles County since 1998; 10,000 of these adoptions can be attributed to the "Adoption Saturday" program.**
- Due to budgetary constraints, Adoption Saturday continued; however, Saturday November 22, 2014 will host an Adoption Saturday where it is expected to complete the adoptions of more than 200 children in foster care.**
- Statistics show that children in foster care are administered psychotropic medications at a significantly higher rate than their non-foster care counterparts. Virtually none of the medications given to foster children have been approved by the FDA for use on children. This causes on going concern within the framework of the juvenile court system since everyone's brain chemistry is different especially with children whose brains are still developing.**
- The juvenile court system can never fully step in to the shoes of a competent parent. Parents know all the nuances about their child and are able to monitor their children to evaluate how they react to psychotropic medications. Such assessment does not occur with foster children in the group home setting.**
- In the state of California, judges are tasked to approve prescriptions for psychotropic medication for foster children. This proves to be difficult for many reasons. For example, a Judge is able to review and**

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research about certain medications, but this methodology is similar to reviewing a textbook. How can judges be sure that the basis of the prescription is based on facts? Judges need help verifying medication information from a group of experts, namely DCFS and the Probation Department, especially because Judges are forced to make decisions in a short amount of time. Due to this predicament, Judge Nash formed a psychotropic medication committee.

- Concerns are raised regarding children who move to different counties or age out of the system because it is unsure if they have the means to keep up with their medication regimens. Interruption or discontinuation of medication regimens often warrant bad results.

**By Common Consent, there being no objection (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), the Commission accepted the Honorable Michael Nash's report.**

**9. Update by Department of Children and Families (DCFS) on Child Fatalities:**

Diane Iglesias, Senior Deputy Director, Government Accountability and Risk Management, DCFS

Francesca LeRúe, Division Chief, Risk Management Division, DCFS (14-5242)

**By Common Consent, there being no objection (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), this item was continued to December 8, 2014.**



**IV. COMMISSION EXECUTIVE LIAISON REPORT**

10. Update by Sylvia Drew Ivie, Commission Executive Liaison, on the Commission's activities. (14-4930)

**Sylvia Drew Ivie, Commission Executive Liaison, reported on the following:**

- **Better Beginnings for Black Babies, a collaborative paid for by the California endowment, hosted a conference on new patterns surrounding the arresting and incarceration of female youth.**
- **A ten-year study (1977-2007) showed that the percentage of girls who have been arrested and imprisoned has gone up by 823 percent. Among this population, 3 to 7% enter the criminal justice system while pregnant. Changes in family structure and the absence of a father figure were among many reasons offered by panelist to explain this change in trend.**

**Ms. Drew Ivie would like the Commission to keep these issues in mind as they move forward with the many other issues the Commission observes, and requested that the Commission ponder the question: how this issue equates in the girls arena versus that of the boys arena.**

**By Common Consent, there being no objection (Commissioners Berger, Konigar-Macklin, Olivas and Vice Chair Kamlager being absent), the Commission accepted Ms. Drew Ivie's report.**

**V. MISCELLANEOUS**

**Matters Not Posted**

11. Matters not posted on the agenda, to be discussed and (if requested) placed on the agenda for action at a future meeting of the Commission, or matters requiring immediate action because of an emergency situation or where the need to take action arose subsequent to the posting of the agenda. (14-5226)

**There were none.**

**Announcements**

12. Announcements for the meeting of November 17, 2014. (14-5227)
- **The Commission for Children and Families' next regular meeting is scheduled for December 8, 2014 at 10:00 a.m., Kenneth Hahn Hall of Administration in Room 739. Directly preceding the regular meeting is the annual Christmas lunch at Grand Central Market.**

- **Chair Friedman reminded the Commission the Annual Christmas lunch will be held at Grand Central Market directly preceding the December 15, 2014, regular meeting.**

**Public Comment**

- 13.** Opportunity for members of the public to address the Commission on item of interest that are within the jurisdiction of the Commission. (14-5228)

**No members of the public addressed the Commission.**

**Adjournment**

- 14.** Adjournment of the meeting of November 17, 2014. (14-5229)

**The meeting adjourned at 11:59 a.m.**